

FRANK J. UXA, JR.*
ROBERT D. BUYAN*
DONALD E. STOUT
KENTON R. MULLINS
JO ANNE M. YBAGEN
LINDA ALLYSON FOX
GREG S. HOLLRIGEL, Ph.D.**

LAW OFFICES OF
STOUT, UXA, BUYAN & MULLINS, LLP

4 VENTURE, SUITE 300
IRVINE, CALIFORNIA 92618
(949) 450-1750
FACSIMILE: (949) 450-1764

WRITERS E-MAIL: gsh@pmlawyers.com

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*PROFESSIONAL CORPORATION
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DATE: January 10, 2005		RECEIVED CENTRAL FAX CENTER JAN 10 2005
PTO IDENTIFIER:	Application Number 10/716,739 Patent Number Inventor: PANDIAN et al.	
TO: GAU 1641, Examiner Counts FAX NUMBER: 703-872-9306		
FROM: Greg S. Hollrigel PHONE: 949-450-1750 Attorney Dkt. #: A1789-DIV		
PAGES (Including Cover Sheet): <u>5</u>		
CONTENTS: 1. Transmittal Form (1 page); and 2. Response (3 pages).		
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	10/716,739
		Filing Date	November 18, 2003
		First Named Inventor	PANDIAN
		Group Art Unit	1641
		Examiner Name	COUNTS
Total Number of Pages in This Submission	5	Attorney Docket Number	A1789-DIV

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below) 1. Facsimile Cover Page.
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual Name	Greg S. Hollrigel Registration No. 45,374	
Signature	/Greg S. Hollrigel/	
Date	January 10, 2005	

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I hereby certify that this correspondence is being facsimile transmitted to the USPTO at fax number 703-872-9306, or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Greg S. Hollrigel		
Signature	/Greg S. Hollrigel/	Date	January 10, 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/716,739 Confirmation No. 6774
Applicant : PANDIAN et al.
Filed : November 18, 2003
Title : METHODS AND KITS FOR DETECTING ITA IN A BIOLOGICAL
SAMPLE

TC/A.U. : 1600/1641
Examiner : COUNTS, G.W.

Docket No. : A-1789 DIV
Customer No. : 33197

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Date: January 10, 2005

By: /Greg S. Hollrigel/
Greg S. Hollrigel

RESPONSE TO DECEMBER 10, 2004 OFFICE ACTION

Dear Sir:

This is in response to the December 10, 2004 Office Action issued by the United States Patent and Trademark Office regarding the above-identified application. A response to the Office Action is due January 10, 2005. Accordingly, this response is being timely filed. Please consider the following remarks:

Remarks/Arguments begin on page 2 of this paper.